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BELL AND ASSOCIATES

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POWER OF ATTORNEY		Attorney Docket No.		KAPUT-001 WO	
		First Named Inventor		KAPUT, JAMES	
		Application Number		PCT/US03/34524	
		Filing Date		31 OCT 2004	
		Group Art Unit			
		Authorized Officer		MARILYN YOUNGER	

I hereby appoint:

☐ Practitioners at Customer Number _____

OR

☒ Practitioner(s) named below:

Name	Registration Number
ADAM W. BELL	43,490

as my/our attorney(s) or agent(s) to prosecute the application identified above, and all related applications (including divisionals, continuations and CIPs) and to transact all business in the United States Patent and Trademark Office connected therewith, and in any PCT or WIPO or European Patent Office or Other Patent Office connected therewith where the practitioner is eligible to practice.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number _____

OR

☐ Practitioners at Customer Number _____

OR

<input checked="" type="checkbox"/> Firm or Individual Name		ADAM BELL			
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I am the:

☒ Applicant/Inventor

☐ Assignee of record of the entire interest. See 37 C.F.R. 3.71.

Statement under 37 C.F.R. 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name	JAMES KAPUT
Signature	<i>James Kaput</i>
Date	4 FEBRUARY 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*

☐ *Total of _____ forms are submitted.



0.216

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)		Attorney Docket No.	Kaput-001
		First Named Inventor	Kaput, James
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	Application Number	To Be Assigned
		Filing Date	Herewith
		Group Art Unit	Unknown
		Examiner Name	Unknown
<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)			

As a below named inventor, I hereby declare that:
My residence, mailing address, and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

IDENTIFICATION OF DIET-REGULATED DISEASE-ASSOCIATED GENES

The specification of which

☒ is attached hereto

or

☐ was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____ (if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application (s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? (Y/N)
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/0213 attached hereto:				

I hereby claim the benefit under Title 35, United States Code, Section 119(e) of any United States provisional application(s) listed below.

Application Serial No.	Filed	Status (Pending, Abandoned, Patented)
60/423,104	11/01/2002	Pending

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States applications listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in said prior applications in the manner required by the first paragraph of Title 35, United States Code Section 112, I acknowledge my duty to disclose material information as defined in Title 37 Code of Federal Regulation, Section 1.56(a) which occurred between the filing dates of the prior applications and the national or Patent Cooperation Treaty international Filing date of this application:

Application Serial No.	Filed	Status (Pending, Abandoned, Patented)

DECLARATION- Utility or Design Patent Application

Direct all correspondence to: <input type="checkbox"/> Customer number Or barcode label		OR <input checked="" type="checkbox"/> Correspondence address below.	
Name: Adam Warwick Bell, D. Phil.			
Address: 416 Funston, Suite 100			
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information or belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) James		Family Name Or Surname Kaput	
Inventor's Signature <i>James Kaput</i>		Date 11-19-03	
Residence: City Justice	State IL	Country US	Citizenship US
Mailing Address 7628 GARDEN LAKE			
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> a petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name Or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	Zip	Country
<input type="checkbox"/> Additional inventors are being named on the _____ supplemental Additional Inventor(s) Sheet(s) PTO/SB/02A attached hereto.			